

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00487470 </div>	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on				
Full Name of Payee Club for Growth			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 20 / 2014</div> </div>	
Mailing Address 2001 L St., NW, Ste. 600			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">231.59</div>	
City State Zip Code Washington DC 20036		Transaction ID : SE.43628 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 20 / 2014</div> </div>		
Purpose of Expenditure tv ad production costs (from advance line 21)		Category/Type		
Name of Federal Candidate THAD COCHRAN			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">317515.76</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Club for Growth			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 20 / 2014</div> </div>	
Mailing Address 2001 L St., NW, Ste. 600			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">48.52</div>	
City State Zip Code Washington DC 20036		Transaction ID : SE.43631 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 20 / 2014</div> </div>		
Purpose of Expenditure radio ad production costs (from advance line 21)		Category/Type		
Name of Federal Candidate THAD COCHRAN			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">317564.28</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">280.11</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Chocola

Signature

[Electronically Filed]

Date

MM / DD / YYYY
02 / 21 / 2014

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION		FEC IDENTIFICATION NUMBER ▼ C C00487470
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2014
Mailing Address 2001 L St., NW, Ste. 600		Amount 79.96
City Washington	State DC	Zip Code 20036
Purpose of Expenditure press release (from advance line 21)	Category/Type	Transaction ID : SE.43632 Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2014
Name of Federal Candidate THAD COCHRAN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 317644.24		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2014
Mailing Address 2001 L St., NW, Ste. 600		Amount 216.14
City Washington	State DC	Zip Code 20036
Purpose of Expenditure email costs (from advance line 21)	Category/Type	Transaction ID : SE.43633 Date of Disbursement or Obligation MM / DD / YYYY 02 / 20 / 2014
Name of Federal Candidate THAD COCHRAN	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 317860.38		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	296.10
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Red Sea, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2014	
Mailing Address 4550 Montgomery Ave. #906		Amount 297012.12	
City Bethesda	State MD	Zip Code 20814	Transaction ID : SE.43626
Purpose of Expenditure tv ad air buy, production costs	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2014	
Name of Federal Candidate THAD COCHRAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Red Sea, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 20 / 2014	
Mailing Address 4550 Montgomery Ave. #906		Amount 19495.38	
City Bethesda	State MD	Zip Code 20814	Transaction ID : SE.43630
Purpose of Expenditure radio ad air buy, production costs	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2014	
Name of Federal Candidate THAD COCHRAN		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	316507.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	317083.71

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Chris Chocola

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Date

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02 / 21 / 2014

Signature